

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

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| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/821,389 | |
| | Filing Date | April 9, 2004 | |
| | First Named Inventor | Terrance P. SNUTCH | |
| | Art Unit | 1612 | |
| | Examiner Name | B. Packard | |
| Total Number of Pages in This Submission | 24 | Attorney Docket Number | 381092000624 |

ENCLOSURES (Check all that apply)

| | | | | |
|---|--|--|---------|--------------------|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (23 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): | | |
| <table border="1" style="width: 100%;"> <tr> <td style="width: 15%;">Remarks</td> <td>Customer No. 25225</td> </tr> </table> | | | Remarks | Customer No. 25225 |
| Remarks | Customer No. 25225 | | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|-------------------------|----------|--------|
| Firm Name | MORRISON & FOERSTER LLP | | |
| Signature | /Kate H. Murashige/ | | |
| Printed name | Kate H. Murashige | | |
| Date | April 7, 2009 | Reg. No. | 29,959 |